

## ARROYO WATER COMPANY, INC.

ORIGINAL

HC 6 Box 1048-L Payson, AZ 85541 (928) 474-1766 Fax (928) 474-7812

November 18, 2009

Phoenix, AZ 85007

**Arizona Corporation Commission** 1200 W. Washington St.

RE: W-04286A-04-0774 Decision # 70206

Enclosed for docket is the monthly coliform test results, dated 10/06/09 from Test America

Well meter read: 4954440

Thank You,

Officera Sukulah Athena Mikulak

Arroyo Water Company

Arizona Corporation Commission DOCKETED

NOV \$ 0 2009

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M NOV 30 P 2: 0

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## Arizona Department of Enivronmental Quality **Drinking Water Microbiological Analysis Report**

(This form is only for DISTRIBUTION SYSTEM compliance samples)

AZ0404029	JAKES CORNER WATER SUPPLY									
PWS ID Number	Name of Public Water System									
10/06/09	10:00	JAY HARRELL P:928-472-3109								
Sample Date	Time	Owner/Contact Person and 10-Digit Phone Number								
	(24- hour clock)									
		r=								
			-Only use if Initia	il Sample was Po	eitiva.					
	1	omy doo i middle dampto was i oblavo-								
Sampling Site ID	or Name	<del>-</del>	Specimen ID Number of Initial Sample							
			Choose One:  Repeat, Original Location Repeat, Other Location Repeat, Downstream Location Repeat, Upstream Location							
•										
		İ								
			400mL Repeat (Single							
			[	300mL Repeat (	Single Tap Only)					
Microbiological Analysis										
					Result					
Analysis		Contaminant	Cont	Analysis Run	"P" = Present					
Method	MCL*	Name	Code	Date/Time	"A" = Absent					
	Present/2 or			· · · · · · · · · · · · · · · · · · ·						
SM9223 B	more coliform)	Total Coliform	3100	10/08/2009 13:30	ABSENT					
	<b></b>									
	Only Report Fe	cal/E.Coli Result	if Total Coliform Res	sult is Positive						
Amelicaia		0	0	A. 1 1 5	Result					
Analysis Method	MCL*	Contaminant	Cont	Analysis Run	"P" = Present					
Metrioo		Name	Code	Date/Time	"A" = Absent					
	Present/2 or	Facal Oalifama	0040							
<del></del>	more coliform) Present/2 or	Fecal Coliform	3013 _							
SM9223 B	more coliform)	Escherichia coli or E. Coli	3014							
			ore total coliform-po	sitivo						
•			5% of the samples m		n-nocitivo					
ii oyot	om 10 <u>-</u> 00,000, and		o 70 Of the samples in	ay be total comon	n-positive.					
		Laboratory	/ Information							
	,	_	laboratory personnel)							
	,	To be inica out by	laboratory personner,							
Specimen Numbe	r: F	SJ0376-01	Lab ID Number:	AZ0728						
•	tAmerica Phoenix									
Printed Name and	Phone Number of	Lab Contact:	Ken Bake	er - (602) 437-3340						
Authorized Signati	ure:		Kei Bakiri							
Date Public Water System Notified:			10/19/2009							
Comments:										
Please mail comp	oleted form to:				<u> </u>					
	Arizo	*	f Environmental Qualit	ty						
			ata Unit 5415B-1							
			eet, Phoenix, Arizona							
For Questions Call: (602) 771-4641 or within AZ (800) 234-5677 ext. 771-4641										

Instructions for the Arizona Drinking Water Microbiological Analysis Reporting Form

DWAR-1 last modified 11/01/07

## Arizona Department of Enivronmental Quality Drinking Water Microbiological Analysis Report (This form is only for DISTRIBUTION SYSTEM compliance samples)

AZ0404083		ARROYO WATER CO								
PWS ID Number		Name of Public Water System								
10/06/09	<u>10:45</u>	JAY HARRELL P:928-472-3109								
Sample Date	Time	Owi	ner/Contact Person ar		umber					
	(24- hour clock)									
		-								
		-Only use if Initial Sample was Positive-								
	3		-Only use it million	a Sample was Po	Sitive-					
Sampling Site ID		<del></del>	Specimen ID	Number of Initial Sa	mnle					
Camping Cito is of Maine										
			Choose One: Repeat, Original Location Repeat, Other Location							
		ı	Repeat, Downstream Locatio							
		Repeat, Upstream L			m Location					
				400mL Repeat (	Single Tap Only)					
		ľ		300mL Repeat (						
Microbiological Analysis										
					Result					
Analysis	1401 #	Contaminant	Cont	Analysis Run	"P" = Present					
Method	MCL*	Name	Code	Date/Time	"A" = Absent					
01.4000 m	Present/2 or									
SM9223 B	more coliform)	Total Coliform	3100	10/08/2009 13:30	ABSENT					
	Only Banad E.	//C O-U D K	77.4 LA 117							
	Only Report Fe	cai/E.Coll Result	if Total Coliform Res	sult is Positive						
Analysis		Contaminant	Cont	Amelysia D.	Result					
Method	MCL*	Name	Cont Code	Analysis Run Date/Time	"P" = Present					
	Present/2 or	Ramo	Code	Date/Time	"A" = Absent					
	more coliform)	Fecal Coliform	3013							
	Present/2 or	Escherichia coli	3013	·						
SM9223 B	more coliform)	or E. Coli	3014							
			ore total coliform-po	sitive						
If syst	em is $\geq$ 33,000, the	n no more than	5% of the samples m	av be total coliform	-positive					
			•	,						
		Laboratory	Information							
	(		laboratory personnel)							
			•							
Specimen Number		SJ0376-03	Lab ID Number:	AZ0728						
***************************************	tAmerica Phoenix									
	Phone Number of I	_ab Contact:		er <u>- (</u> 602) 437-3340						
Authorized Signatu		· · · · · · · · · · · · · · · · · · ·	Kan Baku							
Date Public Water System Notified: Comments:			10/19/2009							
Comments: Please mail comp	leted form to:	····			<del></del>					
i ivase man comp		ina Denartment of	Environmental Quality							
	Alizi	Water Quality Da		у .						
	1110 Wes	st Washington Stre	eet, Phoenix, Arizona (	85007						
Fo	or Questions Call: (	602) 771-4641 or v	within AZ (800) 234-56	377 ext. 771-4641						
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DWAR-1 last modified 11/01/07